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June 2, 2005

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Brenda O. Holmes
FROM

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PAGES (WITH COVER)

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REFERENCE NO

44471/287372

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COMMENTS

Applicant: Hidehiko OSADA et al.
Title: Ventilator
Serial No./Docket No.: 10/611,636 44471/287372
Filed: 06/30/2003

PAPERS SUBMITTED:

1. PTO/SB/21 - Transmittal form;
2. PTO/SB/30 - Request for Continued Examination (RCE);
3. PTO/SB/06 - Patent Application Fee Determination Record;
4. PTO/SB/22 - Petition for Extension of Time (3 months);
5. Second Response in application to final Office Action of 12/03/04; and
6. PTO-2038 Credit card payment form.

Date: June 2, 2005

By: Brenda O. Holmes, Reg. No. 40,339

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/611,636
	Filing Date	06/30/2003
	First Named Inventor	Hidehiko OSADA et al.
	Art Unit	3749
	Examiner Name	Harold Joyce
Total Number of Pages in This Submission	Attorney Docket Number	44471/287372

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) PTO/SB/30 - Request for Continued Examination; 2) PTO/SB/06 - Fee Determination Record; and 3) PTO-2038 Credit Card payment form.
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	KILPATRICK STOCKTON LLP		
Signature	<i>Brenda O. Holmes</i>		
Printed name	Brenda O. Holmes		
Date	06/02/2005	Reg. No.	40,339

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